



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

H. SHITOMI et al

Serial No. 09/648,486

Group Art Unit: 3625

Filed: August 28, 2000

Examiner: S. Chang 10/31/03

For: METHOD AND SYSTEM FOR PROVIDING  
APPLICATION SERVICES

AMENDMENT

Commissioner of Patents  
Alexandria, VA 22314

Sir:

In response to the Office Action dated July 16, 2003,  
please amend the above-identified application as follows:

10/21/2003 ZJUHAR1 00000082 09648486

01 FC:1201

86.00 OP



FORM PTO-1083

PATENT

Case Docket No. ASA-926

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cc/  
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OCT 16 2003  
RE application of SHITOMI et al  
Serial No.: 09/648,486  
Filed: August 28, 1900

Group Art Unit: 3625

Examiner: S. Chang

For: METHOD AND SYSTEM FOR PROVIDING APPLICATION SERVICES

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- No additional fee is required.

The fee has been calculated as shown below:

	(COL. 1)		(COL. 2)		(COL. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra
Total	• 15	Minus	• 20	=	0
<input type="checkbox"/> First Presentation of Multiple Dependent Claims					

SMALL ENTITY	
Rate	Additional Fee
x 9	\$
x 42	\$
+ 140	\$
Total	\$

OTHER THAN A SMALL ENTITY	
Rate	Additional Fee
x 18	\$ 0
x 84	\$ 84
+ 280	\$ 0
Total	\$ 86

- If the entry in Col. 1 is less than the entry in Col. 2, write '0' in Col. 3.  
• If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, write '20' in this space.  
• If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, write '3' in this space.  
The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

Please charge my Deposit Account No. 50-1417 in the amount of \$ \_\_\_\_\_.

*Credit Card Payment Form*

A \$ \_\_\_\_\_ in the amount of \$ 86.00 is attached in payment of:  
Additional independent claim fee.

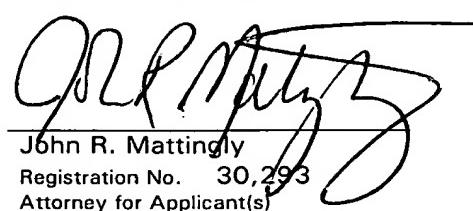
The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1417.

Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

Any patent application processing fees under 37 CFR 1.17.

Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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Date: October 16, 2003